



HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY
200 Hopmeadow Street
Simsbury, Connecticut 06089
(A stock Insurance company)

This rider is attached to a certificate given in connection with The Policy.

This rider becomes effective January 1, 2014.

The Policyholder has established a Voluntary Enrollment period from October 21, 2013 through November 3, 2013. During such enrollment period the following guidelines apply:

1. This rider does not apply if You enroll within 31 days of the date You become eligible under The Policy.
2. You must be an Active Employee and an employee of the County General Division or the School Board Division excluding independent contractors.
3. The **Evidence of Insurability Requirements** provision of the **Eligibility and Enrollment** section is deleted in its entirety and is replaced by the following:

Evidence of Insurability Requirements: *When will I first be required to provide Evidence of Insurability?*
We require Evidence of Insurability for initial Supplemental Life Insurance coverage.

We require Evidence of Insurability for coverage, if You:

- 1) are enrolled for an Amount of Life Insurance with an increase greater than one option or greater than the Supplemental Guaranteed Issue Amount; or
- 2) were eligible for any coverage under the Prior Policy, but did not enroll and later choose to enroll for an amount greater than one option for that coverage under The Policy.

If Your Evidence of Insurability is not satisfactory to Us:

- 1) Your Amount of Life Insurance will equal the amount for which You were eligible without providing Evidence of Insurability, provided You enrolled within 31 days of the date You were first eligible to enroll; and
- 2) You will not be covered under The Policy if You enrolled more than 31 days after the date You were first eligible to enroll.

4. The **Dependent Evidence of Insurability Requirements** provision of the **Eligibility and Enrollment** section is deleted in its entirety and is replaced by the following:

Dependent Evidence of Insurability Requirements: *When will my Dependents first be required to provide Evidence of Insurability?*

We require Evidence of Insurability, for initial coverage, if You:

- 1) enroll for an Amount of Dependent Life Insurance with an increase greater than one option or greater than the Dependent Guaranteed Issue Amount; or
- 2) were eligible for any coverage under the Prior Policy, but did not enroll and now choose to enroll for an amount greater than one option for that coverage under The Policy.

However, no Evidence of Insurability will be required if the Amount of Life Insurance for Your Dependent Child is \$15,000 or less.

If Your Dependents' Evidence of Insurability is not satisfactory to Us, Your Dependents will not be covered under The Policy.

5. The **Evidence of Insurability** provision of the **Eligibility and Enrollment** section is deleted in its entirety and replaced by the following:

Evidence of Insurability: *What is Evidence of Insurability?*

Evidence of Insurability must be satisfactory to Us and may include, but will not be limited to:

- 1) a completed and signed application approved by Us;
- 2) a medical examination, if requested;
- 3) attending Physician's statement, if requested; and
- 4) any additional information We may require.

Evidence of Insurability will be furnished at Our expense. We will then determine if You or Your Dependents are insurable for initial coverage under The Policy, as described in item 4 above.

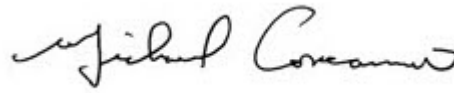
You will be notified in writing of Our determination of any Evidence of Insurability submission.

In all other respects the certificate remains the same.

Signed for Hartford Life and Accident Insurance Company



Terence Shields, Secretary



Michael Concannon, Executive Vice President